

## Attachment 2

## PAST PERFORMANCE QUESTIONNAIRE

(To be completed by the offeror's references and submitted with offer)

1. Contract Number: _____ 2. Contractor (Name, Address & Zip Code): _____
3. Type of Contract (check appropriate box):  <input type="checkbox"/> Negotiated <input type="checkbox"/> Sealed Bid <input type="checkbox"/> Fixed Price <input type="checkbox"/> Cost Reimbursement 4. Complexity of Work (check appropriate box):  <input type="checkbox"/> Difficult <input type="checkbox"/> Routine
5. Description, location & relevancy of work:          
6. Contract Dollar Value: \$ _____ Status: <input type="checkbox"/> Active <input type="checkbox"/> Complete 7. Date of Award: _____ Contract Completion Date (including extensions, if any): _____
8. Type and Extent of Subcontracting:          
9. Name, Address, Telephone #, and e-mail of the Procuring Contracting Officer and/or the Contracting Officer's Representative (COR):          